

UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)
BAC, Paralegal

Publication No. WO 04 / 051135 Publication Date 6-17-04

Basic fee paid: \$ 300 IPER fee paid: \$ 200 ISA fee paid: \$ 400

10/536 913

U. S. Application No. _____

International Application Number: PCT/ IB03/ 04965 International Filing Date: 10-31-03

Application Filed by 30 Month: ☒ Yes _____ No Language: ENG

Copy in International Application: yes ☒ no _____ Translation: yes _____ no _____ Defective: _____ Yes

371 Filing Fees ☒ paid _____ Insufficient _____ Meet Article 33 Requirement: _____ Yes _____ No & why not _____

Original claims: 1-9 Added Claims: _____ Total Claims: 9 Chargeable 9 Independent 1 multiple N

Claims Cancelled via Article 34 & /or Pre-Amdt _____ Claims added via Article 34 _____

Total Number of Drawing Sheets: 2 Foreign Text: _____

Oath/Declaration: yes ☒ no _____ signed ☒ unsigned _____ defective ☒ Date Satisfied: _____

PCT/RO/101/Request Form Declaration: _____ yes: _____ signed _____ Unsigned

Small Entity: _____ Yes Small Entity Statement _____ Assertion by filing fee paid _____ Large Entity: ☒

1st Submission: Biochemical Seq. Diskette: yes _____ no _____ entered & date _____ not entered & date _____

2nd Submission: Biochemical Seq. Diskette: yes _____ no _____ entered & date _____ not entered & date _____

Biochemical Seq. Listing: yes _____ no _____ statement _____ yes _____ no _____ other submission date(s): _____

Biochemical Diskette/Listing not needed: _____

Copy of ISR: _____ with references _____ without references ☒ Non-Establishment of ISR PCT/ISA/203 _____

Article 19 Amendment: _____ entered _____ not entered _____ Replaced by Article 34 Amendment _____

Copy of IPER: _____ without Annexes: _____ with Annexes: _____ Annexes entered _____ Annexes not entered _____ 237

Reason Annexes have not been entered: _____

Preliminary Amendment(s): yes ☒ not entered _____ & Why _____ Other Amendment dates: _____

IDS: _____ yes _____ with references _____ without references _____ Other IDS Dates: _____

Request for Immediate Examination: yes _____ no _____, Other Early Processing Date: _____

Substitute Specification: yes _____ no _____

Assignment: yes ☒ no _____ Date filed: _____ Assignment for PG Pub: _____ Yes _____ No _____ Date filed: _____

Power of Attorney ☒ Application Data Sheet _____ Priority Document(s): yes ☒

Application Size: 4 Spec. 2 Claims 1 Abstract 2 Drawings _____ Seq. List. _____ Seq. RF _____ Total: (9)

Application Fees: owed/paid

_____ Declaration _____ Claims _____ Multiple _____ Translation _____ Extension _____ Petition _____ Application size _____

Date of 35 USC Receipt of Request: _____

Date Completion USC 371 Requirements: _____

Notice of Missing Requirements: 2-25-06 Response to Missing Requirements _____

371 Formalities Letter: (Sequence) 922 _____ 922 Response _____ or (Fees Owed) 923 _____ 923-Repsonse _____

Notice of Defective Response: 5-18-06 Defective Response Reply _____

Notice of Acceptance: _____

Notice of Abandonment: _____ Petition to Revive: _____ Petition 1.47: _____

10/536913

FILED UNDER 35 U.S.C. 371

U.S. UTILITY Patent Application

PATENT NUMBER and
ISSUE DATE

APPLICATION NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART UNIT	EXAMINER
		270		3632	

(FACE)

NOTICE OF ALLOWANCE MAILED		Assistant Examiner	CLAIMS ALLOWED	
			Total Claims	Print Claim for O.G.
ISSUE FEE		Primary Examiner	DRAWING	
Amount Due	Date Paid		Sheets Drwg.	Figs. Drwg.
<input type="checkbox"/> TERMINAL DISCLAIMER		PREPARED FOR ISSUE	Application Examiner	
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